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Our Ref: TW19-599

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Dear Dr Ewer

### **Draft Australasian Integrative Medicine Association (AIMA) Guiding Principles for Letter Writing.**

Thank you for giving The Royal New Zealand College of General Practitioners the opportunity to comment on the draft Australasian Integrative Medicine Association (AIMA) Guiding Principles for Letter Writing.

#### ***Introduction to general practice and the College***

General practice is the medical specialty that treats patients: with the widest variety of conditions; with the greatest range of severity (from minor to terminal); from the earliest presentation to the end; and with the most inseparable intertwining of the biomedical and the psychosocial. General practitioners (GPs) treat patients of all ages, from neonates to elderly, across the course of their lives.

GPs comprise almost 40 percent of New Zealand's specialist workforce and their professional body, The Royal New Zealand College of General Practitioners (the College), is the largest medical college in the country. The College provides training and ongoing professional development for GPs and rural hospital generalists, and sets standards for general practice. The College has a commitment to embed the three principles (participation, partnership and protection) of Te Tiriti o Waitangi (Treaty of Waitangi) across its work, and to achieving health equity in New Zealand.

Health equity is the absence of avoidable or remediable differences in health outcomes and access to health services among groups of people, whether those groups are defined socially, economically, demographically, or geographically (WHO). To achieve health equity, we advocate for:

- A greater focus on the social determinants of health (including labour, welfare, education, housing, and the environment).
- Funding and support to sustain the development of a GP workforce of sufficient capacity to meet population need for access to quality primary medical care, particularly in rural and high need areas.
- Sustained focus on measures to reduce smoking and to increase healthy food options for low-income families.
- Improved integration of primary, community, and secondary care health and social services which ensures the provision of high quality services.
- Universally accessible free primary health care for children and low-income families, because health inequities begin early and compound over the life course.
- A review of the funding model for primary care to ensure that resourcing is allocated equitably across diverse populations with differing needs.

## **Submission**

The College Medical Director Dr Richard Medicott has reviewed the draft document.

We appreciate this move towards good communication between health care practitioners and acknowledge that having information from other caregivers is useful for all of us. In the New Zealand context sending information via secure messaging such as Hmael or Healthlink would be appropriate.

In New Zealand there is increasing roll out of various shared care records. Patients who are registered with Manage My Health or similar portals may be able to share their patient records via this mechanism. We recommend keeping a watching brief on developments in this area.

We hope you find our submission helpful. Should you require any further information or clarification please contact the College's policy team at [policy@rnzccgp.org.nz](mailto:policy@rnzccgp.org.nz).

Yours sincerely



**Tengaruru Wi-Neera**  
Tumuaki Māori

